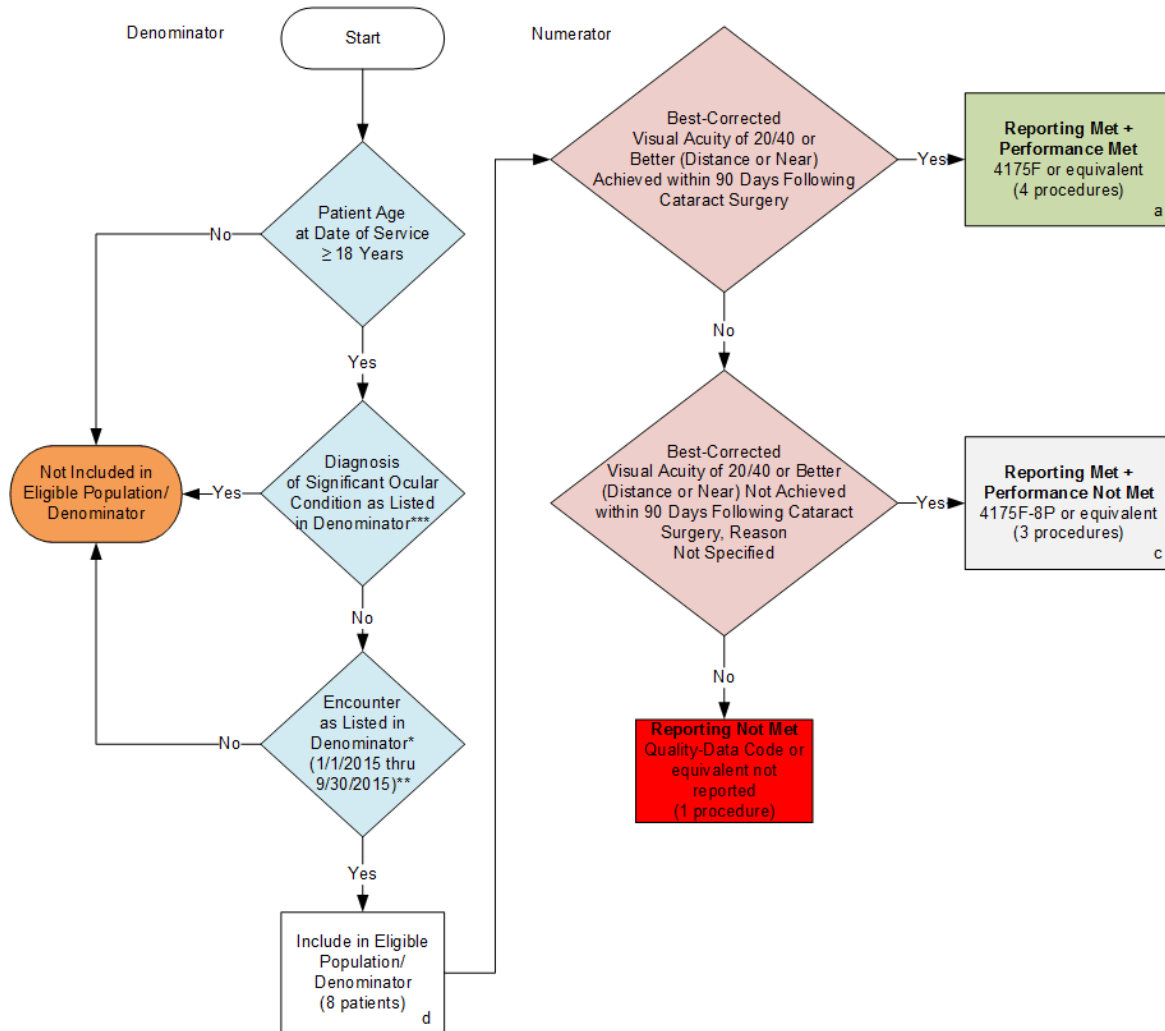


2015 Registry Individual Measure Flow
PQRS #191 NQF #0565: Cataracts: 20/40 or Better Visual Acuity within 90 Days Following Cataract Surgery



SAMPLE CALCULATIONS:

Reporting Rate=

Performance Met (a=4 procedures) + Performance Not Met (c=3 procedures) = $\frac{7 \text{ procedures}}{8 \text{ procedures}} = 87.50\%$
 Eligible Population / Denominator (d=8 procedures) =

Performance Rate=

Performance Met (a=4 procedures) = $\frac{4 \text{ procedures}}{7 \text{ procedures}} = 57.14\%$
 Reporting Numerator (7 procedures) =

*See the posted Measure Specification for specific coding and instructions to report this measure.

**Include only procedures performed before 9/30/2015 to account for 90 day period after the procedure was performed.

***Clinicians who indicate modifier 55, postoperative management only OR modifier 56, preoperative management only, will not qualify for this measure.

NOTE: Report Frequency- Procedure

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2015 Registry Individual Measure Flow
PQRS #191 NQF #0565: Cataracts: 20/40 or Better Visual Acuity within 90 Days
Following Cataract Surgery

Please refer to the specific section of the Measure Specification to identify the denominator and numerator information for use in reporting this Individual Measure.

1. Start with Denominator
2. Check Patient Age:
 - a. If the Age is greater than or equal to 18 years of age at Date of Service and equals No during the measurement period, do not include in Eligible Patient Population. Stop Processing.
 - b. If the Age is greater than or equal to 18 years of age at Date of Service and equals Yes during the measurement period, proceed to check Patient Diagnosis.
3. Check Patient Diagnosis:
 - a. If Diagnosis of Significant Ocular Condition as Listed in the Denominator equals No, proceed to check Encounter Performed.
 - b. If Diagnosis of Significant Ocular Condition as Listed in the Denominator equals Yes, do not include in Eligible Patient Population. Stop Processing.
4. Check Encounter Performed:
 - a. If Encounter as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
 - b. If Encounter as Listed in the Denominator equals Yes, include in the Eligible Population.
5. Denominator Population:
 - a. Denominator population is all Eligible Patients in the denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d equals 8 patients in the sample calculation.
6. Start Numerator
7. Check Best-Corrected Visual Acuity of 20/40 or Better (Distance or Near) Achieved within 90 Days Following Cataract Surgery:
 - a. If Best-Corrected Visual Acuity of 20/40 or Better (Distance or Near) Achieved within 90 Days Following Cataract Surgery equals Yes, include in Reporting Met and Performance Met.
 - b. Reporting Met and Performance Met letter is represented in the Reporting Rate and Performance Rate in the Sample Calculation listed at the end of this document. Letter a equals 4 procedures in Sample Calculation.
 - c. If Best-Corrected Visual Acuity of 20/40 or Better (Distance or Near) Achieved within 90 Days Following Cataract Surgery equals No, proceed to Best-Corrected Visual Acuity of 20/40 or Better (Distance or Near) Not Achieved within 90 Days Following Cataract Surgery, Reason Not Specified.

8. Check Best-Corrected Visual Acuity of 20/40 or Better (Distance or Near) Not Achieved within 90 Days Following Cataract Surgery, Reason Not Specified:
 - a. If Best-Corrected Visual Acuity of 20/40 or Better (Distance or Near) Not Achieved within 90 Days Following Cataract Surgery, Reason Not Specified equals Yes, include in Reporting Met and Performance Not Met.
 - b. Reporting Met and Performance Not Met letter is represented in the Reporting Rate and Performance Rate in the Sample Calculation listed at the end of this document. Letter c equals 3 procedures in the Sample Calculation.
 - c. If to Best-Corrected Visual Acuity of 20/40 or Better (Distance or Near) Not Achieved within 90 Days Following Cataract Surgery, Reason Not Specified equals No, proceed to Reporting Not Met.
9. Check Reporting Not Met:
 - a. If Reporting Not Met equals No, Quality Data Code or equivalent not reported. 1 procedure has been subtracted from the reporting numerator in the sample calculation.

SAMPLE CALCULATIONS:

Reporting Rate=

$$\frac{\text{Performance MeT (a=4 procedures) + Performance Not Met (c=3 procedures)}}{\text{Eligible Population / Denominator (d=8 procedures)}} = \frac{7 \text{ procedures}}{8 \text{ procedures}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance MeT (a=4 procedures)}}{\text{Reporting Numerator (7 procedures)}} = \frac{4 \text{ procedures}}{7 \text{ procedures}} = 57.14\%$$